PLEASE PRINT

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 24 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	James V. Hatem		
II. Name of lobbyist's par	tnership, firm or corporation, if a	ny:	
Nixon Peabody Ll	.P		
(Name of p	partnership, firm or corporation)		
900 Elm Street	Manchester	NH	03101
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 628-4062	(866) 947-0952	e-mail: jhatem@nix	conpeabody.com
(Telephone)	(Fax)	
	: (Choose one – file separate repo ctions which are not attributable		file a separate report fo
All reportable transaction	ons occurring in the months prior to	the reporting date relative to the	following client:
State Farm Insurance C		******	
(Ful	l Name of Client as it appears on the Lo	obbyist Registration Form)	
	ns by the lobbyist (including the lob	obvist's family), or the lobbying (firm listed below which ar
unrelated to any particular c		,, ,,,	
	ril 26, 2017 🔼 m date of registration to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/17	
	tober 25, 2017	January 31, 2018	
	ly from 7/1/17 to 9/30/17	activity from 10/1/17 to 12/31/1	7
	ees received and no reportable lete just this form and submit it to the		
VI. Check if additional rep	oorts are attached:		
•	es or made expenditures, you must i	file Addendum A – Fees and Exp	enses
 If you have paid an hon Expense Reimbursement 	orarium or reimbursed expenses, yo	ou must file Addendum B – Repo	ort of Honorariums or
If you, your firm, or you	ur family has made political contrib	utions, you must file Addendum	C-Political Contribution
Sworn Statement/Affirmate I have read RSA 15, RSA 1 and complete to the best of the best o	5-B, RSA 14-C and RSA 664 and homy knowledge and belief.		
(Signature of lobbyist)	· · · · · · · · · · · · · · · · · · ·	April 20, 211	
James V. Hatem (Print Name of lobbyist)			

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) James V. Hatem		
II. Name of lobbyist's partnership, firm or corporation, if any:		
Nixon Peabody LLP		
(Name of partnership, firm or corporation)	,	
III. Name of Client State Farm Insurance Companies	Date	March 31, 2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations,	or public relations services
a) Total of all fees received in this reporting period	a) \$	17,800.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ ear)	0
c) Total of all fees received to date (Add lines a and b)	c) \$	17,800.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for exampl lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and in any be filted aggregated aggre	of expenditures are made by ed for the lobbyist(s)/firm. It total of all expenses paid to the aggregate total of all eurchased during a business to that is given to the person alue of \$25.00 or less); and dof greater than \$25.00 for er than \$25, purchase of a 5, but not greater than \$50, reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	17,800.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.		0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	17,800.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	17,800.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0
f) Total of all expenses year to date	f) \$	17,800.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fee	es during this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm		
is true and complete to the best of my knowledge and belief.		
V. Hater	Re	1/20,2017
(Signature of lobbyist)		(Date)
James V. Hatem		
(Print Name of lobbyist)		

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